

ISSUE SLIP STAMP AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	3/2
FORMALITY REVIEW	AM	917	83-14-01
RESPONSE FORMALITY REVIEW	HC	712	85-76-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
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If more than 150 claims or 10 actions
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Best Available Copy

AM
 3/15